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CONFIRMATION NO. 9228

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|--|---|---------------------------------------|---|--|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/536,590   | <b>FILING or 371(c) DATE</b><br>05/26/2005<br><b>RULE</b>   | <b>CLASS</b><br><del>525</del><br>442 | <b>GROUP ART UNIT</b><br>1794   | <b>ATTORNEY DOCKET NO.</b><br>10873.1686USWO |                                |
| <b>APPLICANTS</b><br>Shojiro Matsuda, Ayabe-shi, JAPAN;<br>Hitoshi Ohtani, Ayabe-shi, JAPAN;<br>Yoshimi Tanaka, Ayabe-shi, JAPAN;<br>Hideki Tadokoro, Hiroshima-shi, JAPAN;<br><b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/JP03/15687 12/08/2003 OK /JC/<br><b>** FOREIGN APPLICATIONS *****</b><br>JAPAN 2002-364348 12/16/2002 OK /JC/<br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> |   |                                       |   |  |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Verified and /JENNIFER A<br>Acknowledged CHRISS/<br>Examiner's Signature   | <input type="checkbox"/> Met after Allowance<br>Initials  | <b>STATE OR COUNTRY</b><br>JAPAN      | <b>SHEETS DRAWINGS</b><br>7   | <b>TOTAL CLAIMS</b><br>28                    | <b>INDEPENDENT CLAIMS</b><br>1 |
| <b>ADDRESS</b><br>HAMRE, SCHUMANN, MUELLER & LARSON, P.C.<br>P.O. BOX 2902<br>MINNEAPOLIS, MN 55402-0902<br>UNITED STATES  |   |                                       |   |  |                                |
| <b>TITLE</b><br>Medical film   |   |                                       |   |  |                                |
| <b>FILING FEE RECEIVED</b><br>1300   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                       | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                                |